Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
EASTERN DISTRICT OF MICHIGAN	-	
Case number (if known)	Chapter you are filing under:	
	■ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's	David First name	Denise First name
	license or passport).	Middle name	Middle name
	Bring your picture identification to your	Shannon	Shannon
	meeting with the trustee.	Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years		
	Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-4764	xxx-xx-4717

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.	■ I have not used any business name or EINs.		
	Include trade names and doing business as names	Business name(s)	Business name(s)		
		EINs	EINs		
5.	Where you live	18223 Westhampton Ave	If Debtor 2 lives at a different address:		
		Southfield, MI 48075 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code		
		Oakland County	County		
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.		
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code		
6.	Why you are choosing this district to file for	Check one:	Check one:		
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.		
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)		

	otor 1 otor 2	David Shannon Denise Shannon					Case number (if known)	
Par	t 2·	Tell the Court About \	/our Bank	runtey C	250			
7.	The	chapter of the	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy					
	choc	sing to file under	■ Chapt	ter 7				
			☐ Chapt					
			☐ Chapt					
			☐ Chapt					
			Onapi	.01 10				
8.	How	you will pay the fee	abo ord	out how your er. If your	ou may pay. Typically, i	f you are paying the fee y	eck with the clerk's office in your local court for more details yourself, you may pay with cash, cashier's check, or money half, your attorney may pay with a credit card or check with	
							tion, sign and attach the Application for Individuals to Pay	
			☐ I re	equest that	quired to, waive your fee	ou may request this options, and may do so only if y	on only if you are filing for Chapter 7. By law, a judge may, your income is less than 150% of the official poverty line that	
							in installments). If you choose this option, you must fill out ficial Form 103B) and file it with your petition.	
9.		you filed for ruptcy within the	■ No.					
		3 years?	☐ Yes.					
				District		When	Case number	
				District		When	Case number	
				District		When	Case number	
10.		any bankruptcy	■ No					
	filed not f you,	s pending or being by a spouse who is iling this case with or by a business ner, or by an ate?	☐ Yes.					
				Debtor			Relationship to you	
				District		When	Case number, if known	
				Debtor			Relationship to you	
				District		When	Case number, if known	
11.		ou rent your	■ No.	Go to	line 12.			
	resid	lence?	☐ Yes.	Has yo	our landlord obtained a	n eviction judgment agair	nst you?	
					No. Go to line 12.			
							n Judgment Against You (Form 101A) and file it as part of	

	otor 2 David Shannon Denise Shannon				Case number (if known)
Par	t 3: Report About Any Bu	ısinesses	You Owr	as a Sole Proprieto	or
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.	
		☐ Yes.	Name	and location of busi	ness
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	e of business, if any	
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	er, Street, City, State	e & ZIP Code
	it to this petition.		Chec		to describe your business:
					ess (as defined in 11 U.S.C. § 101(27A))
				•	Estate (as defined in 11 U.S.C. § 101(51B))
				,	fined in 11 U.S.C. § 101(53A))
					(as defined in 11 U.S.C. § 101(6))
				None of the above	
Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must a		court must know whether you are a small business debtor so that it can set appropriate a small business debtor, you must attach your most recent balance sheet, statement of ederal income tax return or if any of these documents do not exist, follow the procedure			
	For a definition of small	■ No.	No. I am not filing under Chapter 11.		ter 11.
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am f Code		1, but I am NOT a small business debtor according to the definition in the Bankruptcy
		☐ Yes.	I am f	iling under Chapter 1	1 and I am a small business debtor according to the definition in the Bankruptcy Code.
Par	t 4: Report if You Own or	Have Any	Hazardo	ous Property or Any	Property That Needs Immediate Attention
14.	Do you own or have any property that poses or is	■ No.			
	alleged to pose a threat of imminent and identifiable hazard to	☐ Yes.	What is	the hazard?	
	public health or safety? Or do you own any property that needs immediate attention?			liate attention is why is it needed?	
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	s the property?	
				-	Number, Street, City, State & Zip Code

Debtor 1 Da

David Shannon Denise Shannon

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

		Shannon Shannon				Case number	Pr (if known)		
Part	6: Answer	Γhese Questi	ions for Rep	orting Purposes					
	What kind of you have?	debts do		re your debts primarily consu			ned in 11 U.S.C. § 101(8) as "incurred by an		
				☐ No. Go to line 16b.					
				Yes. Go to line 17.					
				re your debts primarily busing noney for a business or investment					
				No. Go to line 16c.					
				Yes. Go to line 17.					
			16c. S	tate the type of debts you owe t	hat are not consu	mer debts or busines	ss debts		
17.	Are you filing Chapter 7?	under	□ No. I	am not filing under Chapter 7. G	Go to line 18.				
	Do you estimater any exer property is ex	npt cluded and		am filing under Chapter 7. Do yo re paid that funds will be availab			perty is excluded and administrative expenses ?		
	administrative are paid that f	•		No					
	be available for distribution to unsecured creditors?	С] Yes						
18.		How many Creditors do	1 -49		1 ,000-5,000)	☐ 25,001-50,000		
	you estimate owe?	that you	□ 50-99		5001-10,00		50,001-100,000		
	□ 100-199 □ 200-999				□ 10,001-25,0	000	☐ More than100,000		
19.	How much do		□ \$0 - \$50	,000	□ \$1,000,001	- \$10 million	☐ \$500,000,001 - \$1 billion		
	estimate your be worth?	assets to	\$50,001		□ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million		\$1,000,000,001 - \$10 billion		
			1 - \$500,000 1 - \$1 million		1 - \$100 million 01 - \$500 million	☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion			
20.	How much do		□ \$0 - \$50		□ \$1,000,001		□ \$500,000,001 - \$1 billion		
	to be?	nabilities		- \$100,000	☐ \$10,000,001 - \$50 million ☐ \$50,000,001 - \$100 million		☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion		
				1 - \$500,000 1 - \$1 million		01 - \$500 million	☐ More than \$50 billion		
Part	7: Sign Bel	ow							
For	you		I have exan	nined this petition, and I declare	under penalty of	perjury that the inforr	mation provided is true and correct.		
							under Chapter 7, 11,12, or 13 of title 11, noose to proceed under Chapter 7.		
				ey represents me and I did not p I have obtained and read the no			ot an attorney to help me fill out this		
			I request re	lief in accordance with the chapt	ter of title 11, Unit	ed States Code, spe	cified in this petition.		
							or property by fraud in connection with a years, or both. 18 U.S.C. §§ 152, 1341, 1519		
			/s/ David			/s/ Denise Shan			
			David Sha Signature o			Denise Shannor Signature of Debto			
			Executed o	March 28, 2019 MM / DD / YYYY			rch 28, 2019		

Debtor 1	David Shannon		
Debtor 2	Denise Shannon	Case number (if known)	
		•	·

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Robin Lee Busker	Date	March 28, 2019
Signature of Attorney for Debtor		MM / DD / YYYY
Robin Lee Busker		
Printed name		
Salinger and Associates		
irm name		
18411 W. 12 Mile Rd., Ste. 202		
Southfield, MI 48076		
Number, Street, City, State & ZIP Code		
Contact phone (248) 569-5120	Email address	salingerbankruptcy@sbcglobal.net
P39120 MI		
Bar number & State		

Certificate Number: 15725-MIE-CC-032262505



CERTIFICATE OF COUNSELING

I CERTIFY that on <u>February 6, 2019</u>, at <u>11:59</u> o'clock <u>PM EST</u>, <u>David Shannon</u> received from <u>001 Debtorce</u>, <u>Inc.</u>, an agency approved pursuant to 11 U.S.C. § 111 to provide credit counseling in the <u>Eastern District of Michigan</u>, an individual [or group] briefing that complied with the provisions of 11 U.S.C. §§ 109(h) and 111.

A debt repayment plan <u>was not prepared</u>. If a debt repayment plan was prepared, a copy of the debt repayment plan is attached to this certificate.

This counseling session was conducted by internet.

Date: February 7, 2019

By: /s/Calvin Yim

Name: Calvin Yim

Title: Counselor

^{*} Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. *See* 11 U.S.C. §§ 109(h) and 521(b).

Certificate Number: 15725-MIE-CC-032262506



CERTIFICATE OF COUNSELING

I CERTIFY that on <u>February 6, 2019</u>, at <u>11:59</u> o'clock <u>PM EST</u>, <u>Denise Shannon</u> received from <u>001 Debtorce</u>, <u>Inc.</u>, an agency approved pursuant to 11 U.S.C. § 111 to provide credit counseling in the <u>Eastern District of Michigan</u>, an individual [or group] briefing that complied with the provisions of 11 U.S.C. §§ 109(h) and 111.

A debt repayment plan <u>was not prepared</u>. If a debt repayment plan was prepared, a copy of the debt repayment plan is attached to this certificate.

This counseling session was conducted by internet.

Date: February 7, 2019

By: /s/Calvin Yim

Name: Calvin Yim

Title: Counselor

* Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. *See* 11 U.S.C. §§ 109(h) and 521(b).

Fill	in this inforn	nation to identify your	case:				
	otor 1	David Shannon					
Deh	otor 2	First Name Denise Shannon	Middle Name	Last Name			
	use if, filing)	First Name	Middle Name	Last Name			
Uni	ted States Bar	nkruptcy Court for the:	EASTERN DISTRICT	OF MICHIGAN			
	e number						
(if kn	own)					_	c if this is an ded filing
Of	ficial Fo	rm 106Sum					
				nd Certain Statisti			12/15
nfoi youi	rmation. Fill o	out all of your schedulens, you must fill out a	es first; then complete	le are filing together, both a the information on this form ck the box at the top of this	i. If you are filing amende		
Par	Summa	arize Your Assets					
						Your a	ssets of what you own
1.	Schedule A 1a. Copy line	/B: Property (Official Fo	orm 106A/B) com Schedule A/B			\$	59,090.50
	1b. Copy line	e 62, Total personal prop	perty, from Schedule A/E	3		\$	32,156.85
	1c. Copy line	e 63, Total of all property	on Schedule A/B			\$	91,247.35
Par	t 2: Summa	arize Your Liabilities					
							abilities t you owe
2.			aims Secured by Proper nn A, Amount of claim, a	ty (Official Form 106D) at the bottom of the last page of	of Part 1 of Schedule D	\$	159,011.01
3.			Unsecured Claims (Offic 1 (priority unsecured cla	ial Form 106E/F) ims) from line 6e of <i>Schedule</i>	E/F	\$	8,369.90
	3b. Copy the	e total claims from Part	2 (nonpriority unsecured	claims) from line 6j of Schedu	ıle E/F	\$	133,440.32
					Your total liabilities	\$	300,821.23
Par	t 3: Summa	arize Your Income and	Expenses			,	
4.		Your Income (Official Foombined monthly income		ıle I		\$	4,840.30
5.		Your Expenses (Official nonthly expenses from line				\$	4,834.39
Par	4: Answe	r These Questions for	Administrative and Sta	atistical Records			
6.	-		er Chapters 7, 11, or 13 on this part of the form.	? Check this box and submit thi	s form to the court with you	ur other scl	nedules.
7.	■ Yes What kind o	of debt do you have?					

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Summary of Your Assets and Liabilities and Certain Statistical Information Official Form 106Sum

page 1 of 2

Debtor 1	David Shannon
Debtor 2	Denise Shannon

Case number (if known)

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

803.00

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total	claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	8,369.90
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	16,777.18
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	25,147.08

Debtor 1 Debtor 2 (Spouse, if filing) Denise Shannon First Name Denise Shannon First Name Middle N Denise Shannon First Name Middle N Middle N Denise Shannon First Name Middle N Middle N Denise Shannon First Name Middle N Denise Shannon First Name Middle N EASTERN D Case number Describe Each Residence, Building, Land, or Other Space is needed, attach a separate shewnswer every question. Part 1: Describe Each Residence, Building, Land, or Other No. Go to Part 2. Yes. Where is the property? 1.1 18223 Westhampton Ave. Street address, if available, or other description Southfield MI 48075-0000 City State ZIP Code	asset only once. If an asset fits in more than on if two married people are filing together, both are et to this form. On the top of any additional page:	Do not deduct secured the amount of any secured	supplying correct	
United States Bankruptcy Court for the: EASTERN D Case number Difficial Form 106A/B Schedule A/B: Property Describe Each Residence, Building, Land, or Other Service of the Property Do you own or have any legal or equitable interest in any No. Go to Part 2. Telest address, if available, or other description Southfield MI 48075-0000 City State ZIP Code	asset only once. If an asset fits in more than on if two married people are filing together, both are to this form. On the top of any additional page: Real Estate You Own or Have an Interest In residence, building, land, or similar property? What is the property? Check all that apply Single-family home	Do not deduct secured the amount of any secured	amended filing 12/15 in the category where you supplying correct ase number (if known).	
United States Bankruptcy Court for the: EASTERN D Case number Official Form 106A/B Schedule A/B: Property each category, separately list and describe items. List an ink it fits best. Be as complete and accurate as possible. formation. If more space is needed, attach a separate shenswer every question. Part 1: Describe Each Residence, Building, Land, or Other Do you own or have any legal or equitable interest in any No. Go to Part 2. Yes. Where is the property? 1 18223 Westhampton Ave. Street address, if available, or other description Southfield MI 48075-0000 City State ZIP Code	asset only once. If an asset fits in more than on if two married people are filing together, both are to this form. On the top of any additional page: Real Estate You Own or Have an Interest In residence, building, land, or similar property? What is the property? Check all that apply Single-family home	Do not deduct secured the amount of any secured	amended filing 12/15 in the category where you supplying correct ase number (if known).	
Case number Official Form 106A/B Schedule A/B: Property each category, separately list and describe items. List an ink it fits best. Be as complete and accurate as possible. formation. If more space is needed, attach a separate she aswer every question. Part 1: Describe Each Residence, Building, Land, or Other Do you own or have any legal or equitable interest in any No. Go to Part 2. Yes. Where is the property? 1 18223 Westhampton Ave. Street address, if available, or other description Southfield MI 48075-0000 City State ZIP Code	asset only once. If an asset fits in more than on if two married people are filing together, both are to this form. On the top of any additional pages real Estate You Own or Have an Interest In residence, building, land, or similar property? What is the property? Check all that apply Single-family home	Do not deduct secured the amount of any secured	amended filing 12/15 in the category where you supplying correct ase number (if known).	
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each category, separately list and describe items. List an ink it fits best. Be as complete and accurate as possible. formation. If more space is needed, attach a separate she iswer every question. art 1: Describe Each Residence, Building, Land, or Other Do you own or have any legal or equitable interest in any No. Go to Part 2. Yes. Where is the property? 1 18223 Westhampton Ave. Street address, if available, or other description Southfield MI 48075-0000 City State ZIP Code	If two married people are filing together, both are to this form. On the top of any additional pages of Real Estate You Own or Have an Interest In residence, building, land, or similar property? What is the property? Check all that apply Single-family home	Do not deduct secured the amount of any secured	12/15 in the category where you supplying correct ase number (if known).	
each category, separately list and describe items. List an ink it fits best. Be as complete and accurate as possible. Formation. If more space is needed, attach a separate she iswer every question. art 1: Describe Each Residence, Building, Land, or Other Do you own or have any legal or equitable interest in any No. Go to Part 2. Yes. Where is the property? 1 18223 Westhampton Ave. Street address, if available, or other description Southfield MI 48075-0000 City State ZIP Code	If two married people are filing together, both are to this form. On the top of any additional pages of Real Estate You Own or Have an Interest In residence, building, land, or similar property? What is the property? Check all that apply Single-family home	Do not deduct secured the amount of any secured	in the category where you supplying correct ase number (if known).	
each category, separately list and describe items. List an ink it fits best. Be as complete and accurate as possible. formation. If more space is needed, attach a separate she is swer every question. art 1: Describe Each Residence, Building, Land, or Other Do you own or have any legal or equitable interest in any No. Go to Part 2. Yes. Where is the property? 1 18223 Westhampton Ave. Street address, if available, or other description Southfield MI 48075-0000 City State ZIP Code	If two married people are filing together, both are to this form. On the top of any additional pages of Real Estate You Own or Have an Interest In residence, building, land, or similar property? What is the property? Check all that apply Single-family home	Do not deduct secured the amount of any secured	in the category where you supplying correct ase number (if known).	
each category, separately list and describe items. List an ink it fits best. Be as complete and accurate as possible. formation. If more space is needed, attach a separate she iswer every question. art 1: Describe Each Residence, Building, Land, or Othe Do you own or have any legal or equitable interest in any No. Go to Part 2. Yes. Where is the property? 1 18223 Westhampton Ave. Street address, if available, or other description Southfield MI 48075-0000 City State ZIP Code	If two married people are filing together, both are to this form. On the top of any additional pages of Real Estate You Own or Have an Interest In residence, building, land, or similar property? What is the property? Check all that apply Single-family home	Do not deduct secured the amount of any secured	in the category where you supplying correct ase number (if known).	
each category, separately list and describe items. List an ink it fits best. Be as complete and accurate as possible. formation. If more space is needed, attach a separate she iswer every question. art 1: Describe Each Residence, Building, Land, or Othe Do you own or have any legal or equitable interest in any No. Go to Part 2. Yes. Where is the property? 1 18223 Westhampton Ave. Street address, if available, or other description Southfield MI 48075-0000 City State ZIP Code	If two married people are filing together, both are to this form. On the top of any additional pages of Real Estate You Own or Have an Interest In residence, building, land, or similar property? What is the property? Check all that apply Single-family home	Do not deduct secured the amount of any secured	supplying correct ase number (if known).	
No. Go to Part 2. Yes. Where is the property? 1 18223 Westhampton Ave. Street address, if available, or other description Southfield MI 48075-0000 City State ZIP Code	What is the property? Check all that apply Single-family home	the amount of any secu		
No. Go to Part 2. Yes. Where is the property? 1 18223 Westhampton Ave. Street address, if available, or other description Southfield MI 48075-0000 City State ZIP Code	What is the property? Check all that apply Single-family home	the amount of any secu		
Yes. Where is the property? 1 18223 Westhampton Ave. Street address, if available, or other description Southfield MI 48075-0000 City State ZIP Code	Single-family home	the amount of any secu		
18223 Westhampton Ave. Street address, if available, or other description Southfield MI 48075-0000 City State ZIP Code	Single-family home	the amount of any secu		
Street address, if available, or other description Southfield MI 48075-0000 City State ZIP Code	Single-family home	the amount of any secu		
Street address, if available, or other description Southfield MI 48075-0000 City State ZIP Code	Single-family home	the amount of any secu		
Street address, if available, or other description Southfield MI 48075-0000 City State ZIP Code	Single-family home	the amount of any secu		
Street address, if available, or other description Southfield MI 48075-0000 City State ZIP Code	Dunley or multi-unit building	the amount of any secu		
City State ZIP Code	Duplex of main and ballang	Oraditara 14/1 11 0		
City State ZIP Code	Condominium or cooperative	Creditors Who Have C	ve Claims Secured by Property.	
City State ZIP Code	_			
City State ZIP Code	Manufactured or mobile home	Current value of the	Current value of the	
·	Land	entire property? \$118,181.00	portion you own? \$59.090.5	
Oakland	☐ Investment property ☐ Timeshare			
Oakland	☐ Other		ature of your ownership interest nple, tenancy by the entireties, o	
Oakland	Who has an interest in the property? Check one	a life estate), if knowr	1.	
	Debtor 1 only			
County	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only			
,	□ Debtor 1 and Debtor 2 only■ At least one of the debtors and another	Check if this is constructions	ommunity property	
	Other information you wish to add about this ite	,		
	property identification number:	•		

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Debto Debto		avid Shannon enise Shannon		Case number (if known)	
Ca	rs, vans,	trucks, tractors, sport utility ve	hicles, motorcycles		
	No				
	⁄es				
				5	
3.1	Make:	Mitsubishi	Who has an interest in the property? Check one		laims or exemptions. Put ed claims on Schedule D:
	Model:	3000 GT	■ Debtor 1 only		ims Secured by Property.
	Year:	1995	Debtor 2 only	Current value of the	Current value of the
	• •	nate mileage: 71000	Debtor 1 and Debtor 2 only	entire property?	portion you own?
		ormation:	At least one of the debtors and another		
	Autom	obile	☐ Check if this is community property (see instructions)	\$869.00	\$869.0
3.2	Make:	BMW	Who has an interest in the property? Check one	Do not deduct secured c	laims or exemptions. Put
J.Z		740	_		ed claims on Schedule D:
	Model:		■ Debtor 1 only	Creditors Wrio Have Cia	ims Secured by Property.
	Year:	2013	Debtor 2 only	Current value of the	Current value of the
		nate mileage:	Debtor 1 and Debtor 2 only	entire property?	portion you own?
		ormation:	At least one of the debtors and another		
	Autom	ODIIE	☐ Check if this is community property (see instructions)	\$15,874.00	\$15,874.0
3.3	Make:	Nissan	Who has an interest in the property? Check one	Do not deduct secured c	laims or exemptions. Put
J.J		Altima	Debtor 1 only		ed claims on Schedule D:
	Model: Year:	2017	·	Creditors who have Cla	ims Secured by Property.
		nate mileage:	Debtor 2 only	Current value of the	Current value of the
		 -	Debtor 1 and Debtor 2 only	entire property?	portion you own?
	Other inf	ormation:	At least one of the debtors and another		
			☐ Check if this is community property (see instructions)	\$8,293.00	\$8,293.0
Exa	imples: B No Yes	oats, trailers, motors, personal wa	d other recreational vehicles, other vehicles, tercraft, fishing vessels, snowmobiles, motorcycles, fishing vessels, fishing vessels, snowmobiles, motorcycles, fishing vessels,	le accessories	\$25,036.00
	_				
		be Your Personal and Household Ite			
		, , ,	terest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
Ex	<i>amples:</i> No	goods and furnishings Major appliances, furniture, linens scribe	, china, kitchenware		
_	. 55. De		ds and Furnishings		\$1,500.0
		Lilouseiloiu Goo	us and i armsimigs		Ψ1,000.0
		Household Goo	ds and Furnishings		\$1,500.0
		·	-		

Official Form 106A/B

Schedule A/B: Property

Debtor 1 Debtor 2	David Shan Denise Sha		Case number (if known)	
□No	ples: Televisions a	and radios; audio, video, stereo, and digital equipment; comp I phones, cameras, media players, games	uters, printers, scanners; music collections;	electronic devices
_ ,		Household Electronics and Cell Phones		\$400.00
		Household Electronics and Cell Phones		\$400.00
Exam □ No		figurines; paintings, prints, or other artwork; books, pictures ons, memorabilia, collectibles	, or other art objects; stamp, coin, or baseba	all card collections;
		Books and Pictures		\$25.00
		Books and Pictures		\$25.00
□ No ■ Yes	musical insti	Hobby and Sports Equipment		\$40.00
		Hobby and Sports Equipment		\$15.00
■ No □ Yes 11. Cloth <i>Exar</i> □ No	mples: Pistols, rifle s. Describe nes mples: Everyday c	s, shotguns, ammunition, and related equipment othes, furs, leather coats, designer wear, shoes, accessories	S	
		Clothing/Wearing Apparel		\$400.00
		Clothing/Wearing Apparel		\$400.00
☐ No	<i>mples:</i> Everyday je	welry, costume jewelry, engagement rings, wedding rings, h	eirloom jewelry, watches, gems, gold, silver	
		Jewelry		\$100.00
		Jewelry		\$400.00

Official Form 106A/B

Schedule A/B: Property

Debtor 1 Debtor 2	David Shannon Denise Shannon		Case number (if known)	
	arm animals			
	ples: Dogs, cats, birds, h	orses		
■ No □ Yes.	Describe			
14. Any o t	ther personal and hous	ehold items you did ı	not already list, including any health aids you did not list	
■ No				
☐ Yes.	Give specific information	n		
		•	art 3, including any entries for pages you have attached	\$5,205.00
Part 4: De	escribe Your Financial Ass	ets		
Do you o	wn or have any legal or	equitable interest in	any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
6. Cash	unlas: Manay yayı haya in	your wallot in your ho	me, in a safe deposit box, and on hand when you file your petitic	n
■ No	pies. Money you have in	your wallet, in your no	me, in a sale deposit box, and on hand when you lie your petitic	11
.				
	sits of money pples: Checking, savings,	or other financial acco	ounts; certificates of deposit; shares in credit unions, brokerage h	ouses, and other similar
			with the same institution, list each.	,
□ No			Institution name:	
■ Yes.			institution name.	
	17.1	. Credit Union	Advia Credit Union (Denise Shannon)	\$0.00
	17.2	2. Bank	Flagstar Bank (David Shannon)	\$1,486.95
	17.3	3. Credit Union	Vibe Credit Union	\$4.90
8. Bonds	s, mutual funds, or pub	licly traded stocks		
Exam			kerage firms, money market accounts	
■ No □ Yes.		Institution or issuer r	name:	
	ublicly traded stock an venture	d interests in incorpo	prated and unincorporated businesses, including an interest	in an LLC, partnership, and
■ No				
☐ Yes.	Give specific information N	n about themame of entity:	% of ownership:	
Negot	tiable instruments include	e personal checks, cas	tiable and non-negotiable instruments hiers' checks, promissory notes, and money orders. nsfer to someone by signing or delivering them.	
Non-n	າວຽວແລນາ ວ ກາຈແຟກາອກເຮັສເ	c mose you cannot trai	nsion to someone by signing or delivering them.	
	. Give specific information	n about them suer name:		
1. Retire	ment or pension accou			
Exam	ples: Interests in IRA, EF	RISA, Keogh, 401(k), 4	03(b), thrift savings accounts, or other pension or profit-sharing μ	olans
■ No				
☐ Yes.	List each account separ	ately. e of account:	Institution name:	
Official For	, ,	o or account.	Schedule A/B: Property	page 4

De	ebtor 2	Denise Shannon		Case number (if known)	
20	C		_		
22.	Your s Examp		nave made so that you may continue service or use fro prepaid rent, public utilities (electric, gas, water), telec		s, or others
	■ No □ Yes.		Institution name or individual:		
23.	Annuit	ties (A contract for a periodic pay	ment of money to you, either for life or for a number of	years)	
	■ No □ Yes	Issuer name and	description.		
			·	lifical atata toda a mucan	
24.		.C. §§ 530(b)(1), 529A(b), and 52	ecount in a qualified ABLE program, or under a qua 9(b)(1).	lilfled State tuition prog	ram.
	☐ Yes	Institution name a	nd description. Separately file the records of any interest	ests.11 U.S.C. § 521(c):	
25.	Trusts No	s, equitable or future interests in	n property (other than anything listed in line 1), and	I rights or powers exerc	isable for your benefit
	☐ Yes.	Give specific information about	them		
26.			e secrets, and other intellectual property sites, proceeds from royalties and licensing agreemen	nts	
		Give specific information about	them		
27.	_Exam	ses, franchises, and other gene ples: Building permits, exclusive I	ral intangibles icenses, cooperative association holdings, liquor licens	ses, professional licenses	
	■ No □ Yes.	Give specific information about	them		
M	oney or	property owed to you?			Current value of the portion you own? Do not deduct secured claims or exemptions.
28.		funds owed to you			
	□ No ■ Yes.	Give specific information about t	nem, including whether you already filed the returns ar	nd the tax years	
			Potential and approximated income tax refund for current and previous tax		
			year	State	\$212.00
				7	
			Potential and approximated income tax refund for current and previous tax year	State	\$212.00
29.		/ support			
	Exam _i ■ No	ples: Past due or lump sum alimo	ny, spousal support, child support, maintenance, divor	ce settlement, property se	ettlement
	☐ Yes.	Give specific information			
30.		amounts someone owes you ples: Unpaid wages, disability ins	urance payments, disability benefits, sick pay, vacatior	n pay, workers' compens	ation, Social Security
	■ No	benefits; unpaid loans you r			•
		Give specific information			

Official Form 106A/B Schedule A/B: Property page 5

David Shannon

Debtor 1

Debtor 2		Case number (if known)	
	rests in insurance policies amples: Health, disability, or life insurance; health savings account (HS.	A); credit, homeowner's, or renter's insurar	nce
■ Ye	es. Name the insurance company of each policy and list its value. Company name:	Beneficiary:	Surrender or refund value:
	Husband's Term Life Insurance Policy	y Spouse/children	\$0.00
If yo som ■ No	r interest in property that is due you from someone who has died ou are the beneficiary of a living trust, expect proceeds from a life insurneone has died. o es. Give specific information	ance policy, or are currently entitled to rec	eive property because
Exa ■ No	ms against third parties, whether or not you have filed a lawsuit on amples: Accidents, employment disputes, insurance claims, or rights to be so. Describe each claim		
■ No	er contingent and unliquidated claims of every nature, including coop. Describe each claim	ounterclaims of the debtor and rights to	set off claims
■ No	financial assets you did not already list o es. Give specific information		
	Id the dollar value of all of your entries from Part 4, including any or Part 4. Write that number here		\$1,915.85
Part 5:	Describe Any Business-Related Property You Own or Have an Interest In. L	List any real estate in Part 1.	
■ No.	ou own or have any legal or equitable interest in any business-related prop Go to Part 6. s. Go to line 38.	erty?	
	Describe Any Farm- and Commercial Fishing-Related Property You Own or If you own or have an interest in farmland, list it in Part 1.	r Have an Interest In.	
I	you own or have any legal or equitable interest in any farm- or con No. Go to Part 7. Yes. Go to line 47.	nmercial fishing-related property?	
Part 7:	Describe All Property You Own or Have an Interest in That You Did No	ot List Above	
Exa			
⊔Y€	es. Give specific information		
54. Ad	ld the dollar value of all of your entries from Part 7. Write that num	ber here	\$0.00

Official Form 106A/B Schedule A/B: Property page 6

David Shannon Debtor 1 **Denise Shannon** Case number (if known) Debtor 2 Part 8: List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 \$59,090.50 Part 2: Total vehicles, line 5 \$25,036.00 57. Part 3: Total personal and household items, line 15 \$5,205.00 58. Part 4: Total financial assets, line 36 \$1,915.85 Part 5: Total business-related property, line 45 59. \$0.00 Part 6: Total farm- and fishing-related property, line 52 60. \$0.00 Part 7: Total other property not listed, line 54 61. \$0.00 Total personal property. Add lines 56 through 61... \$32,156.85 Copy personal property total \$32,156.85

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$91,247.35

nation to identify your	case:		
David Shannon			
First Name	Middle Name	Last Name	
First Name	Middle Name	Last Name	
nkruptcy Court for the:	EASTERN DISTRICT O	F MICHIGAN	
			☐ Check if this is an
			amended filing
	David Shannon First Name	First Name Middle Name First Name Middle Name	David Shannon First Name Middle Name Last Name First Name Middle Name Last Name

Official Form 106C

Part 1: Identify the Property You Claim as Exempt

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

1.	Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.							
	☐ You are claiming state and federal nonban	kruptcy exemptions.	11 U.S	S.C. § 522(b)(3)				
	■ You are claiming federal exemptions. 11	J.S.C. § 522(b)(2)						
2.	For any property you list on Schedule A/B	that you claim as exe	empt,	fill in the information below.				
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own			Specific laws that allow exemption			
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.				
D	ebtor 1 Exemptions 18223 Westhampton Ave. Southfield, MI 48075 Oakland County	\$59,090.50	•	\$174.22	11 U.S.C. § 522(d)(1)			
	Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit				
	1995 Mitsubishi 3000 GT 71000 miles Automobile	\$869.00		\$869.00	11 U.S.C. § 522(d)(2)			
	Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit				
	2017 Nissan Altima Line from Schedule A/B: 3.3	\$8,293.00		\$124.56	11 U.S.C. § 522(d)(5)			
	Line Holli Schedule AVD. 3.3			100% of fair market value, up to any applicable statutory limit				
	Household Goods and Furnishings Line from Schedule A/B: 6.1	\$1,500.00		\$1,500.00	11 U.S.C. § 522(d)(3)			
	Line nom <i>Schedule A/D</i> . V.1			100% of fair market value, up to any applicable statutory limit				
	Books and Pictures Line from Schedule A/B: 8.1	\$25.00		\$25.00	11 U.S.C. § 522(d)(3)			
	Line Ironi Scheaule A/B: 0.1			100% of fair market value, up to any applicable statutory limit				

Official Form 106C

Schedule C: The Property You Claim as Exempt

page 1 of 4

	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim Check only one box for each exemption.		Specific laws that allow exemption	
		Copy the value from Schedule A/B				
	Hobby and Sports Equipment Line from Schedule A/B: 9.1	\$40.00		\$40.00	11 U.S.C. § 522(d)(5)	
	Line Holli Schedule Arb. 3.1			100% of fair market value, up to any applicable statutory limit		
	Clothing/Wearing Apparel Line from Schedule A/B: 11.1	\$400.00		\$400.00	11 U.S.C. § 522(d)(3)	
	Line Holli Schedule AVD. 11.1			100% of fair market value, up to any applicable statutory limit		
	Jewelry Line from Schedule A/B: 12.1	\$100.00		\$100.00	11 U.S.C. § 522(d)(4)	
	Line Holli Generale PAB. 12.1			100% of fair market value, up to any applicable statutory limit		
	State: Potential and approximated income tax refund for current and	\$212.00		\$212.00	11 U.S.C. § 522(d)(5)	
	previous tax year Line from Schedule A/B: 28.1			100% of fair market value, up to any applicable statutory limit		
3.	Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every			ed on or after the date of adjustme	nt.)	
	Yes. Did you acquire the property cover	red by the exemption wi	thin 1	,215 days before you filed this case	?	
	□ No					
	☐ Yes					

Fill in this infor	mation to identify your	case:		
Debtor 1				
	First Name	Middle Name	Last Name	
Debtor 2	Denise Shannon			
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT C	PF MICHIGAN	
Case number (if known)				☐ Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1:	Identify the	Property	You Claim	as Exempt
---------	--------------	-----------------	-----------	-----------

1.	Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
	☐ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
	■ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
2.	For any property you list on Schedule A/B that you claim as exempt, fill in the information below.
	Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim Specific laws that allow		Specific laws that allow exemption
	Copy the value from Schedule A/B	Chec	ck only one box for each exemption.	
<u>Debtor 2 Exemptions</u> Household Goods and Furnishings Line from Schedule A/B: 6.2	\$1,500.00		\$1,500.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)
Books and Pictures Line from Schedule A/B: 8.2	\$25.00		\$25.00	11 U.S.C. § 522(d)(3)
Line nom Schedule A.B. 3.2			100% of fair market value, up to any applicable statutory limit	
Hobby and Sports Equipment Line from Schedule A/B: 9.2	\$15.00		\$15.00	11 U.S.C. § 522(d)(5)
			100% of fair market value, up to any applicable statutory limit	
Clothing/Wearing Apparel Line from Schedule A/B: 11.2	\$400.00		\$400.00	11 U.S.C. § 522(d)(5)
			100% of fair market value, up to any applicable statutory limit	
Jewelry Line from Schedule A/B: 12.2	\$400.00		\$400.00	11 U.S.C. § 522(d)(4)
			100% of fair market value, up to any applicable statutory limit	

Official Form 106C

Schedule C: The Property You Claim as Exempt

page 3 of 4

Best Case Bankruptcy

	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
	State: Potential and approximated income tax refund for current and	\$212.00		\$212.00	11 U.S.C. § 522(d)(5)
	previous tax year Line from Schedule A/B: 28.2			100% of fair market value, up to any applicable statutory limit	
3.	Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every No			ed on or after the date of adjustme	nt.)
	☐ Yes. Did you acquire the property cove☐ No	red by the exemption wit	hin 1	215 days before you filed this case	?

Fill in this informat	tion to identify you	ır case:			
Debtor 1	David Shannon				
	First Name	Middle Name Last Name		-	
Debtor 2	Denise Shanno	n			
(Spouse if, filing)	First Name	Middle Name Last Name		-	
United States Bankı	ruptcy Court for the	EASTERN DISTRICT OF MICHIGAN		_	
Case number					
(if known)				☐ Check	if this is an
				amend	led filing
					-
Official Form	<u>106D</u>				
Schedule D	: Creditors	Who Have Claims Secured	d by Propert	V	12/15
				<u> </u>	
		If two married people are filing together, both are eq out, number the entries, and attach it to this form. Or			
1. Do any creditors ha	ive claims secured b	y your property?			
		his form to the court with your other schedules. Yo	ou have nothing else	to report on this form	
_		•	od have houning cloc	to report on this form.	
Yes. Fill in al	Il of the information	below.			
Part 1: List All S	Secured Claims			0.1	
for each claim. If more	e than one creditor has	more than one secured claim, list the creditor separately a particular claim, list the other creditors in Part 2. As	Amount of claim	Column B Value of collateral	Column C Unsecured
much as possible, list t	the claims in alphabeti	cal order according to the creditor's name.	Do not deduct the value of collateral.	that supports this claim	portion If any
2.1 Ally Financi	al Inc.	Describe the property that secures the claim:	\$8,168.44	\$8,293.00	\$0.00
Creditor's Name	_	2017 Nissan Altima			
PO Box 811	8	As of the date you file, the claim is: Check all that apply.			
Cockeysville	e, MD 21030	☐ Contingent			
Number, Street, Cit	ty, State & Zip Code	■ Unliquidated			
		☐ Disputed			
Who owes the debt	? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only		■ An agreement you made (such as mortgage or sec	cured		
Debtor 2 only		car loan)			
Debtor 1 and Debto	or 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the	debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this clain	n relates to a	☐ Other (including a right to offset)			

community debt

Date debt was incurred 2017

Last 4 digits of account number

XX

Debtor 1 David Shannon		Case number (if known)		
First Name Middle N	lame Last Name			
Dehise Shannon				
First Name Middle N	lame Last Name			
2.2 Flagstar Mortgage	Describe the property that secures the claim	\$117,832.57	\$118,181.00	\$0.00
Creditor's Name	18223 Westhampton Ave. Southfield, MI 48075 Oakland County			
PO Box 660263 Dallas, TX 75266-0263	As of the date you file, the claim is: Check all tapply. Contingent	hat		
Number, Street, City, State & Zip Code	■ Unliquidated			
Number, Street, City, State & Zip Code	•			
Who owes the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.			
☐ Debtor 1 only ☐ Debtor 2 only	An agreement you made (such as mortgage car loan)	or secured		
☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's l	en)		
At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset) John	E. Shannon		
Date debt was incurred 2017	Last 4 digits of account number 8	582		
2.3 Vibe Credit Union	Describe the property that secures the claim	\$33,010.00	\$15,874.00	\$17,136.00
2.3 Vibe Credit Union Creditor's Name	Describe the property that secures the claim 2013 BMW 740 Automobile	: \$33,010.00	\$15,874.00	\$17,136.00
	2013 BMW 740 Automobile As of the date you file, the claim is: Check all tapply.		\$15,874.00	\$17,136.00
Creditor's Name 22243 Haggerty Rd.	2013 BMW 740 Automobile As of the date you file, the claim is: Check all tapply. Contingent		\$15,874.00	\$17,136.00
Creditor's Name 22243 Haggerty Rd. Novi, MI 48375	2013 BMW 740 Automobile As of the date you file, the claim is: Check all tapply.		\$15,874.00	\$17,136.00
Creditor's Name 22243 Haggerty Rd. Novi, MI 48375 Number, Street, City, State & Zip Code Who owes the debt? Check one. Debtor 1 only	2013 BMW 740 Automobile As of the date you file, the claim is: Check all tapply. Contingent Unliquidated Disputed	hat	\$15,874.00	\$17,136.00
Creditor's Name 22243 Haggerty Rd. Novi, MI 48375 Number, Street, City, State & Zip Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only	2013 BMW 740 Automobile As of the date you file, the claim is: Check all tapply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage car loan)	or secured	\$15,874.00	\$17,136.00
Creditor's Name 22243 Haggerty Rd. Novi, MI 48375 Number, Street, City, State & Zip Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	2013 BMW 740 Automobile As of the date you file, the claim is: Check all tapply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage car loan) Statutory lien (such as tax lien, mechanic's lien)	or secured	\$15,874.00	\$17,136.00
Creditor's Name 22243 Haggerty Rd. Novi, MI 48375 Number, Street, City, State & Zip Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only	2013 BMW 740 Automobile As of the date you file, the claim is: Check all tapply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage car loan)	or secured	\$15,874.00	\$17,136.00
Creditor's Name 22243 Haggerty Rd. Novi, MI 48375 Number, Street, City, State & Zip Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a	2013 BMW 740 Automobile As of the date you file, the claim is: Check all tapply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage car loan) Statutory lien (such as tax lien, mechanic's lien Judgment lien from a lawsuit	or secured	\$15,874.00	\$17,136.00
Creditor's Name 22243 Haggerty Rd. Novi, MI 48375 Number, Street, City, State & Zip Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Date debt was incurred	2013 BMW 740 Automobile As of the date you file, the claim is: Check all tapply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage car loan) Statutory lien (such as tax lien, mechanic's labeled and such as lien, mechanic's labeled and such as lien, mechanic's labeled and such as lawsuit Other (including a right to offset) Last 4 digits of account number	or secured		\$17,136.00
Creditor's Name 22243 Haggerty Rd. Novi, MI 48375 Number, Street, City, State & Zip Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Date debt was incurred	2013 BMW 740 Automobile As of the date you file, the claim is: Check all tapply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage car loan) Statutory lien (such as tax lien, mechanic's labeled Judgment lien from a lawsuit Other (including a right to offset) Last 4 digits of account number	or secured	1	\$17,136.00

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Official Form 106D

Additional Page of Schedule D: Creditors Who Have Claims Secured by Property

Fi	ll in this informa	ation to identify your c	ase:					
De	ebtor 1	David Shannon						
		First Name	Middle Name	e Last Nar	ne			
1	ebtor 2	Denise Shannon						
(Sp	oouse if, filing)	First Name	Middle Name	e Last Nan	ne			
Uı	nited States Banl	kruptcy Court for the:	EASTERN DIS	TRICT OF MICHIGAN				
	ase number							
(If	known)						_	if this is an
							ameno	led filing
O.	fficial Form	106F/F						
			ho Have II	nsecured Claim	16			12/15
				ors with PRIORITY claims			DDIODITY . L	
left	. Attach the Conti ne and case numb	nuation Page to this page ber (if known).	e. If you have no i	If more space is needed, c information to report in a P				
Pa	art 1: List All	of Your PRIORITY Un	secured Claims	;				
1.	•	s have priority unsecured	l claims against y	ou?				
	☐ No. Go to Par	rt 2.						
	Yes.							
2.	identify what type possible, list the	e of claim it is. If a claim has	s both priority and raccording to the	nore than one priority unsect nonpriority amounts, list that creditor's name. If you have the other creditors in Part 3.	claim here a	nd show both priority a	nd nonpriority amoun	ts. As much as
	(For an explanati	ion of each type of claim, se	ee the instructions	for this form in the instruction	n booklet.)	Total claim	Priority amount	Nonpriority amount
2.	City of S	outhfield	l ast	4 digits of account numbe	r 4001	\$235.09	\$235.09	\$0.00
۷.	Priority Cred		Last	4 digits of account number	4001	Ψ233.03	φ233.03	φυ.υυ
	26000 Ev	Sewer Department vergreen Rd.	Whe	n was the debt incurred?	2019		-	
		Id, MI 48076 eet City State Zip Code	As of	the date you file, the clain	n is: Check a	Ill that apply		
		the debt? Check one.	_	ontingent		илак аррлу		
	Debtor 1 on	ly	_	nliquidated				
	Debtor 2 on	ly	_	isputed				
	Debtor 1 an	d Debtor 2 only		of PRIORITY unsecured c	laim:			
	_	of the debtors and another		omestic support obligations				
	_	is claim is for a commun	_	axes and certain other debts	VOLLOWE the	government		
		bject to offset?		laims for death or personal in	•	•		
	■ No			ther. Specify	,, yo			
	_		_ 0	anon. Opeony				

☐ Yes

Water Bill

Debtor 1 Debtor 2	David Shannon Denise Shannon		Case nur	mber (if known)		
2.2	nternal Revenue Service	Last 4 digits of account number	4764	\$2,931.41	\$2,931.41	\$0.00
F	Priority Creditor's Name Department of Treasury	When was the debt incurred?	2019			
	Kansas City, MO 64999-0030 Jumber Street City State Zip Code	As of the date you file, the claim	is: Chack all	that apply		
	incurred the debt? Check one.	☐ Contingent	is. Offect all	шас арргу		
	Debtor 1 only	_				
	Debtor 2 only	Unliquidated				
_	Debtor 1 and Debtor 2 only	☐ Disputed	•			
_	•	Type of PRIORITY unsecured cla	ıım:			
_	At least one of the debtors and another	☐ Domestic support obligations				
	Check if this claim is for a community debt	Taxes and certain other debts y	_			
Is th	e claim subject to offset?	Claims for death or personal inj	ury while you	were intoxicated		
		Other. Specify Back Incor	Tawaa			
		Back incor	ne raxes			
	Launch Servicing LLC Priority Creditor's Name	Last 4 digits of account number	1000	\$4,703.40	\$4,703.40	\$0.00
F	PO Box 91910 Sioux Falls, SD 57109-1910	When was the debt incurred?	PO Box 9	01910		
	lumber Street City State Zip Code	As of the date you file, the claim	is: Check all	that apply		
	incurred the debt? Check one.	☐ Contingent				
	Debtor 1 only	Unliquidated				
	Debtor 2 only	☐ Disputed				
	Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured cla	im:			
	At least one of the debtors and another	☐ Domestic support obligations				
	Check if this claim is for a community debt	Taxes and certain other debts y	ou owe the a	overnment		
ls th	e claim subject to offset?	☐ Claims for death or personal inj	_			
■ 1		☐ Other. Specify				
	'es	Student Lo	an			
	Dakland County Friend of the			4	4	*
	Court	Last 4 digits of account number		\$500.00	\$500.00	\$0.00
F	Priority Creditor's Name PO Box 436012 Pontiac, MI 48341-0434	When was the debt incurred?	2018			
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all	that apply		
Who	incurred the debt? Check one.	☐ Contingent				
= [Debtor 1 only	☐ Unliquidated				
	Debtor 2 only	Disputed				
	Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured cla	im:			
	At least one of the debtors and another	☐ Domestic support obligations				
	Check if this claim is for a community debt	■ Taxes and certain other debts y	rou owe the ar	overnment		
ls th	e claim subject to offset?	☐ Claims for death or personal inj	_			
■ 1	No	☐ Other. Specify				
	'es	Back Child	Support			
Part 2:	List All of Your NONPRIORITY Unsecu	red Claims				
3. Do ar	y creditors have nonpriority unsecured claim	s against you?				
□ No	o. You have nothing to report in this part. Submit	this form to the court with your other	schedules.			
■ Ye	es.					
	Il of your nonpriority unsecured claims in the ured claim, list the creditor separately for each cl					

than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

Page 2 of 15

Debtor 1	David Shannon
Debtor 2	Denise Shannon

Case number (if known)

			Total claim
4.1	Ally Financial	Last 4 digits of account number 8486	\$8,168.44
	Nonpriority Creditor's Name		
	PO Box 8118 Cockeysville, MD 21030	When was the debt incurred? 2017	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	•	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	\square Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Consumer Purchases	
1.2	AT&T	Last 4 digits of account number 2858	\$14.88
	Nonpriority Creditor's Name		
	PO Box 5014 Carol Stream, IL 60197-5014	When was the debt incurred? 2019	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Consumer Purchases	
1.3	Barclays Bank Delaware	Last 4 digits of account number 8831	\$9,149.30
	Nonpriority Creditor's Name c/o FBCS, Inc. 330 S. Rd., Suite 353	When was the debt incurred? 2018	
	Hatboro, PA 19049 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	■ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	Student loans	
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Consumer Purchases	

5		****
Beaumont Health Nonpriority Creditor's Name	Last 4 digits of account number 8097	\$829.36
PO Box 554878	When was the debt incurred? 2019	
Detroit, MI 48255-4878 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	As of the date you me, the claim is. Oneok an that apply	
Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	■ Unliquidated	
☐ Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt s the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	Other. Specify Medical Bill	
Beaumont Health/Lab	Last 4 digits of account number	\$100.00
Nonpriority Creditor's Name PO Box 554878 Detroit, MI 48255-4878	When was the debt incurred? 2018	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	■ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
lebt s the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	Debts to pension or profit-sharing plans, and other similar debts	
■ No □ Yes	Other. Specify Medical Bill Other Specify Medical Bill	
Beaumont Health/Lab Nonpriority Creditor's Name	Last 4 digits of account number	\$100.00
PO Box 5042 Froy, MI 48007-5002	When was the debt incurred? 2018	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	■ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
$oldsymbol{\square}$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	☐ Student loans	
debt s the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not	
No	report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts	
■ INU	- bests to pension or profit-sharing plans, and other similar desis	

Capital One Bank USA	Last 4 digits of account number 4326	\$3,564.73
Nonpriority Creditor's Name PO Box 30281	When was the debt incurred? 2018	
Salt Lake City, UT 84130-0281		
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	Unliquidated	
Debtor 1 and Debtor 2 only	Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you direport as priority claims	d not
No	\square Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	Other. Specify Consumer Purchases	
Capital One Visa	Last 4 digits of account number 4009	\$3,491.05
Nonpriority Creditor's Name PO Box 30285	When was the debt incurred? 2018	
Salt Lake City, UT 84130-0285 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	no or ano date you me, and chammer officers an unas appropri	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	_ Unliquidated	
□ Debtor 1 and Debtor 2 only	Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	☐ Obligations arising out of a separation agreement or divorce that you di	d not
s the claim subject to offset?	report as priority claims	
No	Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify Consumer Purchases	
Comenity Capital HSN	Last 4 digits of account number 5822	\$2,250.07
Nonpriority Creditor's Name PO Box 18212 Columbus, OH 43218	When was the debt incurred? 2019	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
■ Debtor 2 only	■ Unliquidated	
Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you direport as priority claims	d not
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
□ Yes	■ Other Specify Consumer Purchases	

Community Choice Credit Union Nonpriority Creditor's Name	Last 4 digits of account number	1629	\$8,511.
Nonpriority Creditor's Name 31155 Northwestern Hwy. Farmington, MI 48334	When was the debt incurred?	2018	
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.	Пол		
Debtor 1 only	☐ Contingent		
Debtor 2 only	Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed	d alabas	
At least one of the debtors and another	Type of NONPRIORITY unsecured ☐ Student loans	d claim:	
☐ Check if this claim is for a community debt Is the claim subject to offset?	_	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin	ng plans, and other similar debts	
Yes	Other Specify Consumer	Purchases	
Cornerstone Edu Loan Services	Last 4 digits of account number	8893	\$12,073.
Nonpriority Creditor's Name PO Box 145122	When was the debt incurred?	2018	
Salt Lake City, UT 84114-5122 Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.	,		
☐ Debtor 1 only	☐ Contingent		
■ Debtor 2 only	Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
☐ Yes	Other. Specify		
	Student Lo	an	
Credit One Bank Nonpriority Creditor's Name	Last 4 digits of account number	3353	\$3,012
PO Box 98875 Las Vegas, NV 89193-8872	When was the debt incurred?	2018	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
☐ Yes	■ Other. Specify Consumer	Purchases	

Credit One Bank	Last 4 digits of account number 4936	\$649.8
Nonpriority Creditor's Name Attn: Bankruptcy Po Box 98873 Las Vegas, NV 89193	When was the debt incurred? 2018	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that	apply
☐ Debtor 1 only	☐ Contingent	
■ Debtor 2 only	Unliquidated	
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement report as priority claims	t or divorce that you did not
■ No	\square Debts to pension or profit-sharing plans, and other	er similar debts
Yes	Other. Specify Consumer Purchases	
Davinci Virtual Office LLC		\$200.0
Nonpriority Creditor's Name 2150 South 1399 East, Suite 200	Last 4 digits of account number When was the debt incurred? 2018	
Salt Lake City, UT 84106	- Acceptate that a file of a late of the file	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that	арріу
Debtor 1 only	☐ Contingent	
Debtor 2 only	■ Unliquidated	
☐ Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement report as priority claims	
■ No	\square Debts to pension or profit-sharing plans, and other	er similar debts
Yes	Other. Specify Consumer Purchases	
DHS Mgt - Novi Ridge Apts	Last 4 digits of account number 7732	\$345.0
Nonpriority Creditor's Name c/o Merchant and Medical Credit Corporat	When was the debt incurred? 2019	
6324 Taylor Rd Flint, MI 48507		
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that	apply
☐ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	Unliquidated	
■ Debtor 1 and Debtor 2 only	☐ Disputed	
\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreemen report as priority claims	it or divorce that you did not
■ No	☐ Debts to pension or profit-sharing plans, and other	er similar debts

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

Denise Shannon		Case number (if known)	
OTE Energy	Last 4 digits of account number	6834	\$183.00
lonpriority Creditor's Name One Energy Plaza Detroit, MI 48226	When was the debt incurred?	2019	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
Debtor 1 only	☐ Contingent		
Debtor 2 only	Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured	d claim.	
At least one of the debtors and another	☐ Student loans	d Glaini.	
☐ Check if this claim is for a community lebt sthe claim subject to offset?	_	aration agreement or divorce that you did not	
No	☐ Debts to pension or profit-sharin	ng plans, and other similar debts	
Yes	Other. Specify Utility Bill		
Exxon Mobil Business Card	Last 4 digits of account number	0553	\$1,759.50
Ionpriority Creditor's Name PO Box 6404 Sioux Falls, SD 57117-6406	When was the debt incurred?	2018	
lumber Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
lebt s the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
No	Debts to pension or profit-sharing		
Yes	Other. Specify Consumer	Purchases	
First Premier Bank	Last 4 digits of account number	5521	\$1,025.55
Nonpriority Creditor's Name 1820 N. Louise Ave. Sioux Falls, SD 57107	When was the debt incurred?	2018	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
Debtor 1 only	☐ Contingent		
Debtor 2 only	Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
Check if this claim is for a community lebt		aration agreement or divorce that you did not	
s the claim subject to offset?	report as priority claims		
No	 □ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Consumer Purchases		

	Case number (if known)		
Flagstar Visa	Last 4 digits of account number	3186	\$1,996.0
Nonpriority Creditor's Name PO Box 790408 Saint Louis, MO 63179-0408	When was the debt incurred?	2018	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
Debtor 1 only	☐ Contingent		
Debtor 2 only	Unliquidated		
□ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	ng plans, and other similar debts	
□ Yes	Other. Specify Consumer	Purchases	
Gardner White	Last 4 digits of account number	4848	\$3,206.03
Nonpriority Creditor's Name Comenity Capital Bank PO Box 183003	When was the debt incurred?	2018	
Columbus, OH 43218-3003			
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	report as priority claims	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify Consumer	Purchases	
Goodyear Credit Card	Last 4 digits of account number	7686	\$183.6
Nonpriority Creditor's Name PO Box 6403	When was the debt incurred?	2018	
Sioux Falls, SD 57117 Number Street City State Zip Code	As of the date you file, the claim	is: Chack all that apply	
Who incurred the debt? Check one.	As of the date you me, the dam's	oneck all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	\square Debts to pension or profit-sharing plans, and other similar debts		
☐ Yes	Other. Specify Consumer	Purchases	

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

Launch Servicing LLC	Last 4 digits of account number	1000	\$4,703.4
Nonpriority Creditor's Name PO Box 91910	When was the debt incurred?	2018	
Sioux Falls, SD 57109-1910 Number Street City State Zip Code	As of the date you file the claim i	is: Chack all that apply	
Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
☐ Debtor 1 only	☐ Contingent		
■ Debtor 2 only	Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
☐ Yes	Other. Specify		
	Student Lo	an	
LVNV Funding LLC Nonpriority Creditor's Name	Last 4 digits of account number	3353	\$3,012.4
c/o Resurgent Capital Services PO Box 12269	When was the debt incurred?	2018	
Greenville, SC 29603	_		
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
Debtor 1 only	☐ Contingent		
Debtor 1 only Debtor 2 only	■ Unliquidated		
_	_ `		
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured	d claim:	
_	☐ Student loans		
☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
■ No	<u>-</u> ' ' '	□ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify Consumer Purchases		
Novi Ridge Apartments Nonpriority Creditor's Name	Last 4 digits of account number		\$389.0
23955 Pheasant Run Novi, MI 48375	When was the debt incurred?	2018	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
No	☐ Debts to pension or profit-sharing plans, and other similar debts		
Yes	Other. Specify Consumer	Purchases	

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

Sears Citi Bank	Last 4 digits of account number 8488	\$6,582.8
Nonpriority Creditor's Name PO Box 6275	When was the debt incurred? 2018	
Sioux Falls, SD 57117 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you or report as priority claims	lid not
■ No	lacksquare Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Consumer Purchases	
Small Business Administration Nonpriority Creditor's Name	Last 4 digits of account number	\$3,765.9
2 North 20th Street, Suite 320 Birmingham, AL 35203	When was the debt incurred? 2018	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you report as priority claims	did not
■ No	lacksquare Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Loan	
SYNBC/BP	Last 4 digits of account number 4925	¢cE 3
Nonpriority Creditor's Name	Last 4 digits of account number 4925	\$65.3
C-O PO Box 965024 Orlando, FL 32896	When was the debt incurred? 2018	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	_	
Debtor 1 only	Contingent	
Debtor 2 only	Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you of	did not
Is the claim subject to offset?	report as priority claims	
■ No	lacksquare Debts to pension or profit-sharing plans, and other similar debts	
□Yes	■ Other. Specify Consumer Purchases	

SYNBC/Citgo PLCC	Last 4 digits of account number	3215	\$154.07
Nonpriority Creditor's Name 9510 W. 67th Street Merriem, KS 66203	When was the debt incurred?	2018	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
Debtor 1 only	☐ Contingent		
Debtor 2 only	Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	■ Other. Specify Consumer Purchases		
SYNBC/QVC	Last 4 digits of account number	1034	\$1,523.52
Nonpriority Creditor's Name PO Box 965005 Orlando, FL 32896	When was the debt incurred?	2018	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
Debtor 1 only	☐ Contingent		
Debtor 2 only	Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify Consumer	Purchases	
SYNBC/Walmart Nonpriority Creditor's Name	Last 4 digits of account number	6803	\$1,095.33
PO Boxc 965024 Orlando, FL 32896-5024	When was the debt incurred?	2018	
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	■ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecure	d claim:	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim: Student loans		
☐ Check if this claim is for a community debt Is the claim subject to offset?	_	aration agreement or divorce that you did not	
■ No	☐ Debts to pension or profit-sharin	ng plans, and other similar debts	
□ Yes	■ Other Specify Consumer	Durchases	

Syncb/Amazon PLCC	Last 4 digits of account number	1900	\$987.7
Nonpriority Creditor's Name PO Box 965015	When was the debt incurred?	2018	
Orlando, FL 32896-5015 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
■ Debtor 2 only	Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify Consumer	Purchases	
SYNCB/Evine Live	Last 4 digits of account number	0736	\$100.00
Nonpriority Creditor's Name PO Box 965005 Orlando, FL 32896-5005	When was the debt incurred?	2018	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
■ Debtor 2 only	Unliquidated		
Debtor 1 and Debtor 2 only	Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
☐ Yes	Other. Specify Consumer	Purchases	
SYNCB/PayPal Extra SMC	Last 4 digits of account number	8880	\$5,889.00
Nonpriority Creditor's Name PO Box 965005	When was the debt incurred?	2018	•
Orlando, FL 32896 Number Street City State Zip Code	As of the date you file, the claim	is: Chack all that apply	
Who incurred the debt? Check one.	As of the date you me, the claim	13. Officer all that apply	
Debtor 1 only	☐ Contingent		
■ Debtor 2 only	Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
☐ Yes	Other. Specify Consumer	Purchases	

SYNCB/Paypal Smart Connect	Last 4 digits of account number 7189	\$1,373.0
Nonpriority Creditor's Name PO Box 965005	When was the debt incurred? 2018	
Orlando, FL 32896 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	,	
Debtor 1 only	☐ Contingent	
■ Debtor 2 only	Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divoreport as priority claims	rce that you did not
■ No	lacksquare Debts to pension or profit-sharing plans, and other simila	debts
Yes	Other. Specify Consumer Purchases	
Valentine and Kabartas LLC	Last 4 digits of account number 4537	\$3.012.4
Nonpriority Creditor's Name		
LVNV Funding LLC PO Box 325	When was the debt incurred? 2018	
Lawrence, MA 01842-0625 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	The entire date you me, and cham to chook all that apply	
☐ Debtor 1 only	☐ Contingent	
■ Debtor 2 only	Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divo report as priority claims	rce that you did not
■ No	\square Debts to pension or profit-sharing plans, and other simila	debts
☐ Yes	Other. Specify Consumer Purchases	
Vibe Credit Union	Last 4 digits of account number	\$36,712.7
Nonpriority Creditor's Name	Last 4 digits of account number	400,112.11
44575 West 12 Mile Rd.	When was the debt incurred? 2018	
Novi, MI 48377 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	The of the date you me, the claim to: Officer all that apply	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	■ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	☐ Obligations arising out of a separation agreement or divo	rce that you did not
Is the claim subject to offset?	report as priority claims	
No	Debts to pension or profit-sharing plans, and other simila	
☐Yes	Consumer Purchases (1) \$2,4 Other. Specify \$33,010.05 and \$1,218.22	84.47, (2)

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

Debtor 1 David Shannon
Debtor 2 Denise Shannon

4.3
7 Vibe Credit Union
Nonpriority Creditor's Name
44575 West 12 Mile Rd.
Novi, MI 48377
Number Street City State Zip Code

As of the date you file, the claim is: Check all that apply

Novi, MI 48377	when was the debt incurred? 2010
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply
Who incurred the debt? Check one.	
Debtor 1 only	☐ Contingent
☐ Debtor 2 only	■ Unliquidated
☐ Debtor 1 and Debtor 2 only	☐ Disputed
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:
☐ Check if this claim is for a community	☐ Student loans
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims
■ No	\square Debts to pension or profit-sharing plans, and other similar debts
Yes	■ Other. Specify Co-sign Loan Consumer Purchases

Part 3: List Others to Be Notified About a Debt That You Already Listed

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 8,369.90
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 8,369.90
				Total Claim
	6f.	Student loans	6f.	\$ 16,777.18
Total claims				
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.		6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 116,663.14
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 133,440.32

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Fill in this infor	mation to identify your	case:		
Debtor 1	David Shannon			
	First Name	Middle Name	Last Name	
Debtor 2	Denise Shannon			
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT C	PF MICHIGAN	
Case number (if known)				☐ Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

- 1	Person or	company with Name, Number	whom you have th , Street, City, State and ZIF	e contract or lease	State what the contract or lease is for
.1					
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	_
.2					
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	_
2.3					
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	_
2.4	,				
	Name				
	Number	Street			_
	City		State	ZIP Code	<u> </u>
2.5	- 11			0000	
	Name				_
	Number	Street			<u> </u>
	City		State	ZIP Code	_

Fill in thi	is information to identify your	case:				
Debtor 1	David Shannon	A. I.				
Debtor 2	First Name Denise Shannon	Middle Name	Last Name			
(Spouse if, f		Middle Name	Last Name			
United St	tates Bankruptcy Court for the:	EASTERN DISTRICT (OF MICHIGAN			
Case nur (if known)	mber				☐ Check if this is amended filing	
	al Form 106H dule H: Your Cod	ebtors				12/15
people ar fill it out, your nam	rs are people or entities who a re filing together, both are equ and number the entries in the ne and case number (if known) by you have any codebtors? (If	ally responsible for sup boxes on the left. Attac . Answer every question	plying correct information h the Additional Page to t n.	n. If more space is the his page. On the to	needed, copy the Addition	nal Page,
□ No						
	ithin the last 8 years, have you ona, California, Idaho, Louisiana,					ude
_	o. Go to line 3. es. Did your spouse, former spou	use, or legal equivalent liv	e with you at the time?			
in lir Forn	olumn 1, list all of your codebt ne 2 again as a codebtor only i n 106D), Schedule E/F (Official Column 2.	f that person is a guaraı	ntor or cosigner. Make su	re you have listed t	he creditor on Schedule	D (Official
	Column 1: Your codebtor Name, Number, Street, City, State and Zl	P Code		Column 2: The cr Check all schedul	editor to whom you owe to esthat apply:	the debt
3.1	John E. Shannon 18223 Westhampton Ave. Southfield, MI 48075			■ Schedule D, □ Schedule E/F □ Schedule G _ Flagstar Mortg	, line	

Fill	in this information to identify your	case:								
Del	btor 1 David Sha	nnon			_					
1	btor 2 Denise Sh	annon			_					
Uni	ited States Bankruptcy Court for t	he: EASTERN DISTRICT	Γ OF MICHIGAN		_					
	se number nown)		_			☐ An ☐ As		ed filing ent showir	ng postpetition	
0	fficial Form 106I						1 / DD/ \		· · · · · · · · · · · · · · · · · · ·	
	chedule I: Your Inc	come				IVIIV	ו וטטווי	1111		12/15
sup spo atta	as complete and accurate as popularing correct information. If you are separated and you have a separated sheet to this form	ou are married and not fili our spouse is not filing w n. On the top of any addit	ing jointly, and your vith you, do not inclu	spouse i ude inforr	is livi matic	ing with yon about y	ou, incl our spo	ude infor ouse. If m	mation about nore space is	your needed,
1.	Fill in your employment information.		Debtor 1				Debtor 2	2 or non-f	filing spouse	
	If you have more than one job,	Employment status	■ Employed	■ Employed			■ Empl	oyed		
	attach a separate page with information about additional	Employment status	☐ Not employed			☐ Not employed				
	employers.	Occupation	Disabled				Disable	ed		
	Include part-time, seasonal, or self-employed work.	Employer's name								
	Occupation may include studen or homemaker, if it applies.	t Employer's address								
		How long employed	there?				_			
Pai	tt 2: Give Details About M	onthly Income								
	mate monthly income as of the use unless you are separated.	date you file this form. If	you have nothing to r	report for	any I	ine, write \$	\$0 in the	space. In	nclude your no	n-filing
If yo	ou or your non-filing spouse have e space, attach a separate sheet	more than one employer, c to this form.	ombine the information	on for all e	emplo	yers for th	at perso	on on the	lines below. If	you need
						For Debte	or 1		ebtor 2 or ling spouse	
2.	List monthly gross wages, sa deductions). If not paid monthly			2.	\$		0.00	\$	0.00	
3.	Estimate and list monthly over	ertime pay.		3.	+\$		0.00	+\$	0.00	
4	Calculate gross Income Add	line 2 + line 3		4	\$	0	000	\$	0.00	

Debtor 1 David Shannon Debtor 2 **Denise Shannon**

Case number (if known)

				For	Debtor 1	For Debtor 2 or non-filing spouse		
	Copy	y line 4 here	4.	\$	0.00	\$	0.00	
		,		*—	0.00	Ť	0.00	
5.	List a	all payroll deductions:						
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	0.00	\$	0.00	
	5b.	Mandatory contributions for retirement plans	5b.	\$	0.00	\$	0.00	
	5c.	Voluntary contributions for retirement plans	5c.	\$	0.00	\$	0.00	
	5d.	Required repayments of retirement fund loans	5d.	\$	0.00	\$	0.00	
	5e.	Insurance	5e.	\$	0.00	\$	0.00	
	5f.	Domestic support obligations	5f.	\$	0.00	\$	0.00	
	5g.	Union dues	5g.	\$	0.00	\$	0.00	
	5h.	Other deductions. Specify:	5h.+	\$	0.00	+ \$	0.00	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	0.00	\$	0.00	
7.	Calc	ulate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	0.00	\$	0.00	
8.	List a 8a.	All other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. Interest and dividends	8a. 8b.	\$	0.00	\$	0.00	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	0.00	\$	0.00	
	8d.	Unemployment compensation	8d.	\$	0.00	\$	0.00	
	8e.	Social Security	8e.	\$	0.00	\$	1,300.00	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.	\$	0.00	\$	0.00	
	8g.	Pension or retirement income	8g.	\$	803.30	\$	0.00	
	8h.	Other monthly income. Specify: Social Security Disability	_8h.+	\$	2,737.00	+ \$	0.00	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	3,540.30	\$	1,300.00	
10.		ulate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	0. \$	3	\$,540.30 +	1,300.	.00 = \$4	,840.30
11.	Include other	e all other regular contributions to the expenses that you list in Schedule. de contributions from an unmarried partner, members of your household, your of friends or relatives. ot include any amounts already included in lines 2-10 or amounts that are not a lify:	depend	•	,	ed in <i>Sche</i>	edule J. 11. +\$	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The result that amount on the Summary of Schedules and Statistical Summary of Certaines				if it	12. \$ 4	,840.30
13.	Do y	ou expect an increase or decrease within the year after you file this form?	•				monthly i	ncome
		Yes. Explain:						
	_	· L						

				·		ı		
	in this informa	ation to identify yo	our case:					
Deb	otor 1	David Shann	non			_	neck if this is:	
	otor 2	Denise Shan	non				A supplement sho	wing postpetition chapter
(Spo	ouse, if filing)						13 expenses as of	the following date:
Unit	ed States Bank	ruptcy Court for the	: EASTE	RN DISTRICT OF MICHIO	SAN		MM / DD / YYYY	
	e number nown)							
0	fficial Fo	orm 106J						
S	chedule	J: Your	Exper	ises				12/15
Be	as complete ormation. If m mber (if know	and accurate as	s possible. eded, atta ry question	. If two married people ar ch another sheet to this				
1.	Is this a join		illoiu					
	☐ No. Go to	o line 2.						
	Yes. Doe	es Debtor 2 live	in a separ	ate household?				
	■ N □ Y	-	st file Offici	al Form 106J-2, Expenses	s for Separate House	ehold of De	ebtor 2.	
2.	Do you hav	e dependents?	□ No					
	Do not list D Debtor 2.	•	Yes.	Fill out this information for each dependent	Dependent's relati Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
	Do not state	the						□ No
	dependents				Son		17	Yes
							4.5	□ No
					Son		19	■ Yes □ No
					Daughter		26	■ Yes
								□ No
								☐ Yes
3.	expenses o	penses include of people other t d your depende	:han 👝	No Yes				
Par		nate Your Ongoi						
exp		a date after the l		uptcy filing date unless y y is filed. If this is a supp				
the		h assistance an		government assistance i cluded it on <i>Schedule I:</i> \			Your exp	penses
4.		or home owners and any rent for th		ses for your residence. I	nclude first mortgage		\$	976.00
	If not include	ded in line 4:						
	4a. Real e	estate taxes				4a.	\$	0.00
		erty, homeowner's	s, or renter	's insurance		4b.	\$	0.00
				ıpkeep expenses		4c.		0.00
	4d. Home	eowner's associat	tion or cond	dominium dues		4d.	\$	0.00

Official Form 106J

Additional mortgage payments for your residence, such as home equity loans

0.00

David Shannon Debtor 1 Debtor 2 Denise Shannon Case number (if known) **Utilities:** Electricity, heat, natural gas 6a. \$ 6a. 144.88 6b. Water, sewer, garbage collection 6b. \$ 235.07 6c. Telephone, cell phone, Internet, satellite, and cable services 6c. \$ 224.00 6d. Other. Specify: 6d. \$ 0.00 Food and housekeeping supplies 7. \$ 1,100.00 Childcare and children's education costs 8. \$ 300.00 Clothing, laundry, and dry cleaning 9. \$ 300.00 Personal care products and services 10. \$ 95.00 11. Medical and dental expenses 11. 200.00 12. Transportation. Include gas, maintenance, bus or train fare. 250.00 12. \$ Do not include car payments. 13. Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$ 50.00 14. Charitable contributions and religious donations 14. \$ 0.00 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15a. \$ 0.00 15b. Health insurance 15b. \$ 0.00 15c. Vehicle insurance 15c. \$ 445.44 15d. Other insurance. Specify: 15d. \$ 0.00 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 16. \$ 0.00 Installment or lease payments: 17a. Car payments for Vehicle 1 17a. \$ 514.00 17b. Car payments for Vehicle 2 17b. \$ 0.00 17c. Other. Specify: 17c. \$ 0.00 17d. Other. Specify: 17d. \$ 0.00 Your payments of alimony, maintenance, and support that you did not report as 0.00 deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. \$ Other payments you make to support others who do not live with you. 0.00 19. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 0.00 20a. \$ 20b. Real estate taxes 20b. \$ 0.00 20c. \$ 20c. Property, homeowner's, or renter's insurance 0.00 20d. Maintenance, repair, and upkeep expenses 20d. \$ 0.00 20e. Homeowner's association or condominium dues 20e. \$ 0.00 21. Other: Specify: 21. +\$ 0.00 22. Calculate your monthly expenses 22a. Add lines 4 through 21. 4,834.39 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 \$ 22c. Add line 22a and 22b. The result is your monthly expenses. 4,834.39 Calculate your monthly net income. 23a. Copy line 12 (your combined monthly income) from Schedule I. 23a. \$ 4,840.30 23b. Copy your monthly expenses from line 22c above. 23b. -\$ 4,834.39 Subtract your monthly expenses from your monthly income. 5.91 23c. The result is your monthly net income. 24. Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage? No. ☐ Yes. Explain here:

Official Form 106J 19-44639-mbm Doc 1 Filed 03/28/19 Entered 03/28/19 14:04:54 Page 45 of 64

Fill in this info	ormation to identify your o	ase:				
Debtor 1	David Shannon					
	First Name	Middle Name	Las	Name		
Debtor 2	Denise Shannon					
(Spouse if, filing)	First Name	Middle Name	Las	Name		
United States I	Bankruptcy Court for the:	EASTERN DISTRICT OF	MICHIGA	N		
Case number						☐ Check if this is an
,						amended filing
You must file to		e bankruptcy schedules o	or amende	d schedules. M	aking a false stater	nent, concealing property, or , or imprisonment for up to 20
Si	ign Below					
Did you p	pay or agree to pay some	one who is NOT an attorn	ey to help	you fill out ban	kruptcy forms?	
■ No						
☐ Yes.	Name of person					ruptcy Petition Preparer's Notice, and Signature (Official Form 119)
	nalty of perjury, I declare t are true and correct.	hat I have read the summ	nary and s	chedules filed v	vith this declaration	n and
X /e/ De	avid Shannon		¥	/s/ Denise Sh	annon	
	d Shannon		^	Denise Shan		
	ture of Debtor 1			Signature of De		
Date	March 28, 2019			Date March	28, 2019	

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

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Best Case Bankruptcy

Fill in	this inform	nation to identify you	r case:			
Debto	r 1	David Shannon				
Debto	r 2	First Name Denise Shannor	Middle Name	Last Name		
	e if, filing)	First Name	Middle Name	Last Name		
United	d States Bar	nkruptcy Court for the:	EASTERN DISTRICT OF	MICHIGAN		
Case	number					
(if know						heck if this is an
					a	mended filing
		<u>rm 107</u>				
Stat	ement	of Financial	Affairs for Individ	duals Filing for B	ankruptcy	4/16
					equally responsible for sup	
		ore space is needed, ı). Answer every que		this form. On the top of an	y additional pages, write you	ir name and case
Part 1			arital Status and Where You	Lived Refore		
				Liveu Belole		
1. W	/hat is your	current marital statu	us?			
	Married					
	Not mar	ried				
2. D	uring the la	ast 3 years, have you	lived anywhere other than	where you live now?		
_						
_	I No I Yes List	t all of the places you l	lived in the last 3 years. Do no	ot include where you live now	1	
_		, ,	·	·		
L	Debtor 1 Pri	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	aress:	Dates Debtor 2 lived there
3. W	lithin the la	st 8 years did you e	ver live with a snouse or lea	ial equivalent in a commun	ity property state or territory	12 (Community property
					ico, Texas, Washington and W	
	No					
_	-	ke sure you fill out Sc	hedule H: Your Codebtors (Of	ficial Form 106H).		
		,	`	,		
Part 2	Explai	n the Sources of You	ır Income			
					ear or the two previous cale	ndar years?
			ou received from all jobs and a have income that you receive			
_	_	g a journ babb and jou	mare meeme mary earseem	a togothor, not it omy once an		
_						
	Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income	Gross income	Sources of income	Gross income (before deductions
			Check all that apply.	(before deductions and exclusions)	Check all that apply.	and exclusions)
		year before that:	■ Wages, commissions,	\$148,918.00	☐ Wages, commissions,	\$0.00
(Janu	ary 1 to De	cember 31, 2017)	bonuses, tips	,	bonuses, tips	, -
			Operating a business		☐ Operating a business	

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 1

Did you receive any other income during this year or the two previous calendar years?

Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.

List each source and the gross income from each source separately. Do not include income that you listed in line 4.

П Nο

For last calendar year:

Yes. Fill in the details.

Pension/Annuity	\$59.235.00		Unknown
Social Security Benefits	\$13,974.00	Social Security	\$0.00
Debtor 1 Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Debtor 2 Sources of income Describe below.	Gross income (before deductions and exclusions)

For the calendar year before that: (January 1 to December 31, 2017)

(January 1 to December 31, 2018)

Part 3: List Certain Payments You Made Before You Filed for Bankruptcy

- Are either Debtor 1's or Debtor 2's debts primarily consumer debts?
 - Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more?

□ No. Go to line 7.

□ Yes List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

- * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.
- Debtor 1 or Debtor 2 or both have primarily consumer debts.

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

No.

☐ Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

Creditor's Name and Address Dates of payment Total amount Amount you Was this payment for ... paid still owe

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

	otor 1 otor 2	David Shannon Denise Shannon			Cas	se number (ii	f known)		
7.	Insider of which	1 year before you filed for bankrupters include your relatives; any general parts you are an officer, director, person in thess you operate as a sole proprietor. 1 y.	artners contr	s; relatives of any gene ol, or owner of 20% or	eral partners; partners more of their voting	erships of wh g securities;	hich yoι and an	are a gener y managing a	al partner; corporations agent, including one for
	■ N	o es. List all payments to an insider.							
		er's Name and Address	Dat	es of payment	Total amount paid	Amount still	you owe	Reason for	this payment
8.	inside	1 year before you filed for bankrupt r? e payments on debts guaranteed or cos	-		ments or transfer a	any propert	y on ac	count of a d	ebt that benefited an
	■ N	o es. List all payments to an insider							
	•	er's Name and Address	Dat	es of payment	Total amount paid	Amount	you		this payment
Por	t 4:	dentify Legal Actions, Repossession	no on	d Forceloguros	Para	-			2.10. 0 110.110
	List all modific	1 year before you filed for bankrupt such matters, including personal injury cations, and contract disputes. o es. Fill in the details.							
	Case Case	title number	Nat	ure of the case	Court or agency			Status of the	ne case
10.	Check ■ N □ Y	1 year before you filed for bankrupt all that apply and fill in the details below o. Go to line 11. es. Fill in the information below.	w.	as any of your prope	rty repossessed, f	foreclosed,	garnisl Date	ned, attache	d, seized, or levied? Value of the
	Orcar	tor Nume and Address					Dute		property
11.	accou	90 days before you filed for bankrup nts or refuse to make a payment bec o es. Fill in the details.	otcy, o			nancial inst	itution,	set off any	amounts from your
	Credi	tor Name and Address	Des	scribe the action the	creditor took		Date a	ction was	Amount
12.	2. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No								
		es							
Par	t 5:	List Certain Gifts and Contributions							
13.	■ N	•	otcy, d	lid you give any gifts	with a total value	of more tha	an \$600) per person	?
		es. Fill in the details for each gift. with a total value of more than \$600 erson		Describe the gifts			Dates the gif	you gave its	Value
		on to Whom You Gave the Gift and					J.,		

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

	otor 2 Denise Shannon		(Case number ((if known)			
14.	Within 2 years before you filed for bank	ruptcy, c	lid you give any gifts or contribution	ns with a tota	I value of more than	\$600 to any charity?		
	■ No □ Yes. Fill in the details for each gift or contribution.							
	3 · ·				D-1	Walan		
	Gifts or contributions to charities that more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Coc		Describe what you contributed		Dates you contributed	Value		
Par	t 6: List Certain Losses							
15.	Within 1 year before you filed for bankru or gambling?	uptcy or	since you filed for bankruptcy, did y	ou lose anyt	hing because of the	ft, fire, other disaster,		
	■ No							
	Yes. Fill in the details.							
	Describe the property you lost and	Doscri	be any insurance coverage for the lo	200	Date of your	Value of property		
	how the loss occurred	Include	the amount that insurance has paid. Lace claims on line 33 of Schedule A/B:	ist pending	loss	lost		
Par	t 7: List Certain Payments or Transfer			, ,				
	Include any attorneys, bankruptcy petition ☐ No ☐ Yes. Fill in the details. Person Who Was Paid Address Email or website address	propuror	Description and value of any prop	·	Date payment or transfer was made	Amount of payment		
	Person Who Made the Payment, if Not	You			maue			
	Debtor CC, Inc.		\$10		02/06/2019	\$10.00		
	Debtor CC, Inc.		\$10		02/06/2019	\$10.00		
17.	Within 1 year before you filed for bankrupromised to help you deal with your cree Do not include any payment or transfer that No Yes. Fill in the details.	ditors o	r to make payments to your creditor		r transfer any prope	erty to anyone who		
	Person Who Was Paid		Description and value of any prop	erty	Date payment	Amount of		
	Address		transferred	,	or transfer was made	payment		
18.	Within 2 years before you filed for bank transferred in the ordinary course of you include both outright transfers and transfer include gifts and transfers that you have al	ur busin s made a	ess or financial affairs? as security (such as the granting of a s					
	Yes. Fill in the details.							
	Person Who Received Transfer Address		Description and value of property transferred		any property or received or debts change	Date transfer was made		
	Person's relationship to you			•				

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

	beneficiary: (These are often called asset-pro	nection devices.)					
	■ No						
	Yes. Fill in the details.						
	Name of trust	Description and	value of the pro	operty tran	sferred	Date Transfer was made	
Par	8: List of Certain Financial Accounts, Ins	struments, Safe Deposi	it Boxes, and S	Storage Un	its		
20.	Within 1 year before you filed for bankruptc	y, were any financial ac	counts or inst	ruments h	eld in your name, or for	your benefit, closed,	
	sold, moved, or transferred? Include checking, savings, money market, o houses, pension funds, cooperatives, assoc			•	sit; shares in banks, cred	lit unions, brokerage	
	No The state of th						
	Yes. Fill in the details.						
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of acco	ount or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer	
21.	Do you now have, or did you have within 1 y cash, or other valuables?	year before you filed fo	r bankruptcy, a	any safe de	eposit box or other depo	sitory for securities,	
	■ No						
	Yes. Fill in the details.						
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)			Describe	e the contents	Do you still have it?	
22.	Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?						
	■ No □ Yes. Fill in the details.						
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or to it? Address (Number, S		Describe	e the contents	Do you still have it?	
Par	9: Identify Property You Hold or Control	State and ZIP Code) for Someone Else					
23.	Do you hold or control any property that so for someone.	meone else owns? Incl	ude any prope	rty you bo	rrowed from, are storing	for, or hold in trust	
	■ No						
	Yes. Fill in the details.						
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the pro (Number, Street, City, 5 Code)		Describe	e the property	Value	
Par	10: Give Details About Environmental Info	ormation					
For	he purpose of Part 10, the following definition	ons apply:					
	Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.						
	Site means any location, facility, or property to own, operate, or utilize it, including dispo	_	environmental	law, whet	her you now own, opera	te, or utilize it or used	
	Hazardous material means anything an envi hazardous material, pollutant, contaminant,	ironmental law defines	as a hazardou	s waste, h	azardous substance, tox	cic substance,	
Rep	ort all notices, releases, and proceedings that	at you know about, reg	ardless of whe	n they occ	eurred.		

19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 5

24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?								
	■ No □ Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State a ZIP Code)	and	Environmental law, if you know it	Date of notice			
25.	Have you notified any governmental unit of an	ny release of hazardous material?						
	■ No □ Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State a ZIP Code)	and	Environmental law, if you know it	Date of notice			
26.	Have you been a party in any judicial or admir	nistrative proceeding under any en	viron	mental law? Include settlements ar	nd orders.			
	■ No □ Yes. Fill in the details.							
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Na	ature of the case	Status of the case			
Par	t 11: Give Details About Your Business or Co	onnections to Any Business						
27.	Within 4 years before you filed for bankruptcy	, did you own a business or have a	any o	f the following connections to any	business?			
	☐ A sole proprietor or self-employed in a	a trade, profession, or other activity	y, eitl	her full-time or part-time				
	☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)							
	☐ A partner in a partnership							
	☐ An officer, director, or managing exec	utive of a corporation						
	☐ An owner of at least 5% of the voting of	or equity securities of a corporation	n					
	■ No. None of the above applies. Go to Part 12.							
	☐ Yes. Check all that apply above and fill in	the details below for each busines	ss.					
		Describe the nature of the business	3	Employer Identification number				
	Address (Number, Street, City, State and ZIP Code)	Name of accountant or bookkeeper		Do not include Social Security number or ITIN. Dates business existed				
28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all fin institutions, creditors, or other parties.								
	■ No □ Yes. Fill in the details below.							
	Name C Address	Date Issued						
	(Number, Street, City, State and ZIP Code)							

Debtor 1 Debtor 2	David Shannon Denise Shannon			Case number (if known)	
Part 12:	Sign Below				
are true ar with a ban		tement,	concealing propert	and I declare under penalty of perjury that the answers cy, or obtaining money or property by fraud in connection 20 years, or both.	
/s/ David	l Shannon	/s/ Der	nise Shannon		
David SI	hannon	Denise Shannon			
Signature	e of Debtor 1	Signatu	ure of Debtor 2		
Date M	arch 28, 2019	Date	March 28, 2019		
Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No □ Yes					
Did you pa	ay or agree to pay someone who is not an attor	ney to h	elp you fill out ban	kruptcy forms?	
☐ Yes. Na	ame of Person Attach the Bankruptcy Petit	ion Prep	arer's Notice, Declar	ration, and Signature (Official Form 119).	

United States Bankruptcy Court Eastern District of Michigan

e		Shannon Shannon			Case No.	
_			1	Debtor(s)	Chapter	7
			STATEMENT OF ATTO PURSUANT TO F.	ORNEY FOR DEBTOR R.BANKR.P. 2016(b)	<u>R(S)</u>	
	The und	lersigned, pursua	nt to F.R.Bankr.P. 2016(b), states that:			
		-	torney for the Debtor(s) in this case.			
		•	or agreed to be paid by the Debtor(s) to	the undersigned is: [Chec	rk onel	
	[X]	FLAT FEE	ragiced to be paid by the Bestor(s) to	are undersigned is. [Chec	ck onej	
	A.	For legal serv	ices rendered in contemplation of and in the filing fee paid			900.00
	B.	Prior to filing	this statement, received			0.00
	C.	The unpaid ba	lance due and payable is			900.00
	[]	RETAINER				
	A.	Amount of re	ainer received			
	B.		ned shall bill against the retainer at an he all Court approved fees and expenses e			urly rate schedule.] Debtor(s) have
	\$ <u>335</u>	5.00 of the fili	ng fee has been paid.			
		n for the above-d not apply.]	sclosed fee, I have agreed to render leg	al service for all aspects	of the bankrupt	cy case, including: [Cross out any
	A.	Analysis of the bankruptcy;	debtor's financial situation, and render	ing advice to the debtor i	n determining v	whether to file a petition in
	B.	Preparation an	d filing of any petition, schedules, states			
	C.		of the debtor at the meeting of creditor			
	D. E.	Representation Reaffirmations	of the debtor in adversary proceedings .	and other contested bank	kruptcy matters	;
	F.	Redemptions;	,			
	G.	Other:				
	By agre	ement with the d	ebtor(s), the above-disclosed fee does n	ot include the following	services:	
	The sou	rce of payments	to the undersigned was from:			
	A.		Debtor(s)' earnings, wages, compen			
	B.	XX	Other (describe, including the identi	ty of payor) Leg	al Plan	
			shared or agreed to share, with any othe sation paid or to be paid except as follo		n members of th	ne undersigned's law firm or
ed:	Marc	h 28, 2019		/s/ Rob	in Lee Buske	er
				Robin Salinge 18411 \ Southf (248) 5	y for the Debtor Lee Busker er and Assoc W. 12 Mile Ro ield, MI 48076 69-5120	iates I., Ste. 202
				_		@sbcglobal.net
eed:		avid Shannon			ise Shannon	
	Debto	d Shannon		Denise Debtor	Shannon	
	שטטטט	71		Deotor		

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file Chapter 7 Statement of Your Current Monthly Income (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the Chapter 7 Means Test Calculation (Official Form 122A-2).

If your income is above the median for your state, you must file a second form —the Chapter 7 Means Test Calculation (Official Form 122A-2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called exempt property. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on Schedule C: The Property You Claim as Exempt (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans.

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_form s.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on Voluntary Petition for Individuals Filing for Bankruptcy (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a joint case. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days before you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

United States Bankruptcy Court Eastern District of Michigan

In re	David Shannon Denise Shannon		Case No.	
		Debtor(s)	Chapter	7
	VER	RIFICATION OF CREDITOR N	MATRIX	
The abo	ove-named Debtors hereby verify	that the attached list of creditors is true and con	rrect to the best	of their knowledge.
Date:	March 28, 2019	/s/ David Shannon		
		David Shannon		
		Signature of Debtor		
Date:	March 28, 2019	/s/ Denise Shannon		
		Denise Shannon		

Signature of Debtor

Ally Financial PO Box 8118 Cockeysville, MD 21030

Ally Financial Inc. PO Box 8118 Cockeysville, MD 21030

AT&T PO Box 5014 Carol Stream, IL 60197-5014

Barclays Bank Delaware c/o FBCS, Inc. 330 S. Rd., Suite 353 Hatboro, PA 19049

Beaumont Health PO Box 554878 Detroit, MI 48255-4878

Beaumont Health/Lab PO Box 554878 Detroit, MI 48255-4878

Beaumont Health/Lab PO Box 5042 Troy, MI 48007-5002

Capital One Bank USA PO Box 30281 Salt Lake City, UT 84130-0281

Capital One Visa PO Box 30285 Salt Lake City, UT 84130-0285

City of Southfield Water & Sewer Department 26000 Evergreen Rd. Southfield, MI 48076

Comenity Capital HSN PO Box 18212 Columbus, OH 43218

Community Choice Credit Union 31155 Northwestern Hwy. Farmington, MI 48334

Cornerstone Edu Loan Services PO Box 145122 Salt Lake City, UT 84114-5122

Credit One Bank PO Box 98875 Las Vegas, NV 89193-8872

Credit One Bank Attn: Bankruptcy Po Box 98873 Las Vegas, NV 89193

Davinci Virtual Office LLC 2150 South 1399 East, Suite 200 Salt Lake City, UT 84106

DHS Mgt - Novi Ridge Apts c/o Merchant and Medical Credit Corporat 6324 Taylor Rd Flint, MI 48507

DTE Energy One Energy Plaza Detroit, MI 48226

Exxon Mobil Business Card PO Box 6404 Sioux Falls, SD 57117-6406

First Premier Bank 3820 N. Louise Ave. Sioux Falls, SD 57107

Flagstar Mortgage PO Box 660263 Dallas, TX 75266-0263

Flagstar Visa PO Box 790408 Saint Louis, MO 63179-0408 Gardner White Comenity Capital Bank PO Box 183003 Columbus, OH 43218-3003

Goodyear Credit Card PO Box 6403 Sioux Falls, SD 57117

Internal Revenue Service Department of Treasury Kansas City, MO 64999-0030

John E. Shannon 18223 Westhampton Ave. Southfield, MI 48075

Launch Servicing LLC PO Box 91910 Sioux Falls, SD 57109-1910

Launch Servicing LLC PO Box 91910 Sioux Falls, SD 57109-1910

LVNV Funding LLC c/o Resurgent Capital Services PO Box 12269 Greenville, SC 29603

Novi Ridge Apartments 23955 Pheasant Run Novi, MI 48375

Oakland County Friend of the Court PO Box 436012 Pontiac, MI 48341-0434

Sears Citi Bank PO Box 6275 Sioux Falls, SD 57117

Small Business Administration 2 North 20th Street, Suite 320 Birmingham, AL 35203

SYNBC/BP C-O PO Box 965024 Orlando, FL 32896

SYNBC/Citgo PLCC 9510 W. 67th Street Merriem, KS 66203

SYNBC/QVC PO Box 965005 Orlando, FL 32896

SYNBC/Walmart PO Boxc 965024 Orlando, FL 32896-5024

Syncb/Amazon PLCC PO Box 965015 Orlando, FL 32896-5015

SYNCB/Evine Live PO Box 965005 Orlando, FL 32896-5005

SYNCB/PayPal Extra SMC PO Box 965005 Orlando, FL 32896

SYNCB/Paypal Smart Connect PO Box 965005 Orlando, FL 32896

Valentine and Kabartas LLC LVNV Funding LLC PO Box 325 Lawrence, MA 01842-0625

Vibe Credit Union 22243 Haggerty Rd. Novi, MI 48375

Vibe Credit Union 44575 West 12 Mile Rd. Novi, MI 48377 Vibe Credit Union 44575 West 12 Mile Rd. Novi, MI 48377